Vermont Department of Labor Apprenticeship Division

APPRENTICE CHANGE IN STATUS

Sponsor:		nsor:	Telephone No.:		
Ар	pren	entice:	Date Registered:		
So	cial :	al Security Number:			
<u>CC</u>	MP	IPLETE ALL PARTS OF THE APPROPRIATE S	SECTION BELOW:		
ļ.	<u>LAYOFF</u>				
-	A.	The above apprentice was laid-off on	because of		
	B.	3. The sponsor intends to call the apprentice ba	ack to work on, or about, _	·	
ĮI.	CANCELLATION / TERMINATION				
-	A.	. The above apprentice should be canceled from the sponsor's apprenticeship program effective, which is the last date for which a breakdown of hours was entered on the master record card. A total of on-the-job training hours were recorded as of that date.			
	В.	The reason for cancellation is:			
		the apprentice voluntarily left employmen	nt on		
		the apprentice wishes to cancel the appre	enticeship effective		
		the sponsor canceled the apprentice's required the individual.			
		the sponsor terminated the apprentice's e	employment on	·	
		Reason for termination / cancellation:			
III.	cc	COMPLETION (Once verified, a Completion C	Certificate will be issued) <u>: </u>	
	A.	A. The above apprentice completed his/her app	orenticeship on	·	
	В.	B. As of that date, the apprentice had recorded in the trade.	a total of on-the	-job training hours	
	C.	C. As of that date, the wage was	·		
IV.	At	At this time, the above program remains activ	ve or, is inactive		
Signature of Sponsor:			Date:		
Field Representative:			Date:	ET-274 (7/05)	
				()	